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7590 10/19/2005

Harness Dickey & Pierce P L C
P O Box 828
Bloomfield Hills, MI 48303

01 FC:1501 1400.00 DA
02 FAP0001 TYPE 15.00 DA

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G. Gregory Schivley	(Depositor's name)
<i>J. Gregory Schivley</i>	(Signature)
December 29, 2005	(Date)

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
09/664,643	09/19/2000	Koichi Miyasaka	9319S-000157	4946

TITLE OF INVENTION: CONDUCTOR-PATTERN TESTING METHOD, AND ELECTRO-OPTICAL DEVICE

01/04/2006 TBESHAW2 00000137 09664643

01 FC:1501	1400.00 DA	02 FAP0001 TYPE	15.00 DA	SMALL ENTITY	ISSUE FEE	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	NO	\$1400	\$0		\$1400		01/19/2006	

EXAMINER	ART UNIT	CLASS-SUBCLASS
NORRIS, JEREMY C	2841	174-261000

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).

- Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.
 "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. **Use of a Customer Number is required.**

2. For printing on the patent front page, list

- (1) the names of up to 3 registered patent attorneys or agents OR, alternatively,
(2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.

1 Harness, Dickey & Pierce, P.L.C.
2 _____
3 _____

3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

Seiko Epson Corporation

Japan

Please check the appropriate assignee category or categories (will not be printed on the patent): Individual Corporation or other private group entity Government

4a. The following fee(s) are enclosed:

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 Publication Fee (No small entity discount permitted)
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 The Director is hereby authorized to charge the required fee(s), or credit any overpayment, to Deposit Account Number 50-3213 (enclose an extra copy of this form).

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a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27. b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).

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Authorized Signature _____

Date December 29, 2005

Typed or printed name G. Gregory Schivley

Registration No. 27,382

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